



OFFICE OF THE ILLINOIS STATE FIRE MARSHAL

Division of Petroleum and Chemical Safety

1035 Stevenson Drive
Springfield, Illinois 62703-4259
(217)785-1020 or (217)785-5878

FOR OFFICE USE ONLY

Facility # _____

APPLICATION for **Motor Fuel Dispensing Facility Permit**

Complete application and submit with site plans (8½ x 11" only) both in triplicate (one original and two copies) at the above address

Note: Facilities are not approved for fuel dispensing until a final inspection and approval has been granted after an on-site inspection conducted by the OSFM's Division of Petroleum & Chemical Services (DPCS)

(1) **OWNER** - Corporation, partnership, or other business entity:
(Must provide a mailing address)

(2) **FACILITY** - (Name and address where dispensing will occur)

Name

Name

Street Address

Street Address

City State Zip

City State Zip County

Contact Person Phone

Contact Person Phone

(3) **THIS FACILITY WILL BE OPERATED AS** (Check all that apply):

- ☐ An Attended Self-Service Motor Fuel Dispensing Facility
☐ A Fleet Vehicle Motor Fuel Dispensing Facility
☐ A Marine Motor Fuel Dispensing Facility
☐ An Unattended Self-Service Motor Fuel Dispensing Facility
☐ A Full Service Motor Fuel Dispensing Facility

(4) **THIS APPLICATION APPLIES TO:**

- ☐ A newly constructed motor fuel dispensing facility
☐ The conversion of existing motor fuel dispensing facility to another type of facility (if current permit # is known please list): _____
☐ The remodeling of a currently permitted motor fuel dispensing facility (if current permit # is known please list): _____

(5) **DISPENSING DEVICES**

Number of Dispensing Devices to be Self-Service: _____ Number of Dispensing Devices to be Full-Service: _____
Number of Dispensing Devices to be Fleet Service: _____ Number of Dispensing Devices to Marine Dispensing: _____
Number of Dispensing Devices to Unattended for any portion of a 24 hours period: _____

(6) **IS COLLISION PROTECTION PROVIDED IN ACCORDANCE WITH NFPA 58 FOR ANY LP-GAS STORAGE CABINETS?**

- ☐ Yes ☐ No ☐ N/A (no LP-Gas Storage is present at this facility)
If "Yes" specify: ☐ Guardrails ☐ Steel or Concrete Bollards ☐ Raised Sidewalks ☐ Other: _____

(7) **ARE ANY DWELLING UNITS OR SLEEPING AREAS LOCATED AT THIS FACILITY?** ☐ Yes ☐ No

If "Yes" explain and indicate location of sleeping areas on submitted drawings: _____

(8) **ARE EMERGENCY SHUTOFF SWITCH/S:**

Provided at the Control Station for Attended Facilities? ☐ Yes ☐ No ☐ N/A (not an attended facility)
Located so that an emergency switch is located at least 20 ft. and not more than 100 ft. from each dispenser? ☐ Yes ☐ No
Conspicuously marked and easily accessible? ☐ Yes ☐ No
Interconnected so that activation of one emergency shutoff activates all shutoffs? ☐ Yes ☐ No
Located at each dispensing island for Unattended and Fleet Facilities? ☐ Yes ☐ No

(9) **ARE PORTABLE FIRE EXTINGUISHERS PROVIDED AS REQUIRED BY REGULATIONS?** ☐ Yes ☐ No

(10) **ARE FUEL DISPENSERS PROTECTED AGAINST COLLISION DAMAGE?** ☐ Yes ☐ No Method: _____

(11) **WILL ANY BUILDINGS ON THIS PROPERTY OR ADJACENT TO THIS PROPERTY CONTAIN BASEMENTS LOCATED WITHIN 20 FT OF UNDERGROUND DISPENSING STORAGE TANKS?** ☐ Yes ☐ No

(12) **ARE WARNING AND INSTRUCTIONAL SIGNS POSTED AS REQUIRED BY THE RULES?** ☐ Yes ☐ No

(13) **IS A METHOD THAT DOES NOT REQUIRE COIN OR CURRENCY PROVIDED FOR CONTACTING THE FIRE DEPARTMENT?**
☐ Yes ☐ No (Required at all except Marina Motor Fuel Dispensing Facilities)

ANSWER QUESTIONS # 14 -16 IF THE FACILITY WILL BE OPERATED AS AN ATTENDED SELF SERVICE FACILITY:

(14) IS A CONTROL STATION LOCATED AS REQUIRED BY THE RULES? ☐ Yes ☐ No

(15) ARE ALL DISPENSING DEVICES READILY VISIBLE FROM THE CONTROL STATION?

☐ Yes ☐ No (but alternative means allowed by the rules are provided: Specify means:_____

(16) FOR DISPENSERS > 40 FT. FROM THE CONTROL STATION, IS A MEANS PROVIDED FOR THE ATTENDANT TO COMMUNICATE WITH PERSONS IN THE DISPENSING AREA? ☐ Yes ☐ No ☐ N/A

ANSWER QUESTIONS # 17 – 22 IF THE FACILITY WILL BE OPERATED AS AN UNATTENDED SELF-SERVICE FACILITY:

(17) UNATTENDED ISLANDS ARE PROVIDED WITH: ☐ Fire Suppression System (type:_____) ☐ Fire Detection System

If Fire Suppression System:

Does the fire suppression system include agent discharge nozzles mounted above dispensers and at or near ground level? ☐ Yes ☐ No

Does activation of the suppression system automatically activate an emergency shutoff switch? ☐ Yes ☐ No

Does activation of the fire suppression system automatically sound an alarm notification device audible throughout the dispensing area? ☐ Yes ☐ No

Does activation of the fire suppression system automatically transmit an alarm to the fire department via an acceptable method? ☐ Yes ☐ No

If Fire Detection System:

What is the method of detection? ☐ Rate Compensation Detectors ☐ Rate of Rise Detectors ☐ Flame Detectors

Is the fire detection system located below a weather enclosure canopy? ☐ Yes ☐ No

(Required unless written documentation is submitted indicating that the detection system will operate without a canopy).

Does activation of the detection system automatically activate an emergency shutoff switch? ☐ Yes ☐ No

Does activation of the detection system automatically sound an alarm notification device audible throughout the dispensing area? ☐ Yes ☐ No

Does activation of detection system automatically transmit an alarm to the fire department via an acceptable method? ☐ Yes ☐ No

Are fire extinguishers installed at each dispensing island and at the emergency shutoff switch? ☐ Yes ☐ No

(18) DOES THE FACILITY HAVE THE CAPABILITY TO AUTOMATICALLY TRANSMIT AN ALARM TO THE FIRE DEPARTMENT?

☐ Yes ☐ No (This is required for all unattended motor fuel dispensing facilities regardless of suppression or detection system alarm transmission).

(19) DOES ACTIVATION OF THE EMERGENCY SWITCH AUTOMATICALLY TRANSMIT AN ALARM TO NOTIFY THE LOCAL FIRE DEPARTMENT? ☐ Yes ☐ No

(20) ARE SIGNS PLACED AT OR NEAR EACH EMERGENCY SHUTOFF SWITCH INDICATING “TRANSMITS A FIRE ALARM TO THE FIRE DEPARTMENT”? ☐ Yes ☐ No

(21) WHAT IS THE METHOD OF FUEL DISPENSER ACTIVATION? ☐ Key ☐ Card ☐ Coin ☐ Other: _____

(22) HOW ARE LIMITS ON DISPENSABLE QUANTITIES ACHIEVED? _____

ANSWER QUESTION #23-24 IF THE FACILITY WILL BE OPERATED AS A MARINE MOTOR FUEL DISPENSING FACILITY:

(23) IS SPILL CONTAINMENT PROVIDED ON DOCKS ADJACENT TO DISPENSERS? ☐ Yes ☐ No

(24) ARE DISPENSER NOZZLES OF THE AUTOMATIC CLOSING TYPE WITHOUT HOLD-OPEN CLIPS OR DEVICES? ☐ Yes ☐ No

SUBMITTED PLANS MUST INDICATE: All lot lines and dimensions; Building Locations and Dimensions; Location of all dispensing devices; Location of Control Stations & Emergency Shutoff Switch/s; Fire Extinguisher Locations & Sizes; The Location of any LPG or Flammable/Combustible Liquid Storage Tanks at the Site; LPG cylinder storage cabinets. **Insufficient information or illegibility can be cause for return or denial.**

This application does not apply to the installation/modification of underground storage tanks at this facility. A separate application is required for any work involving Underground Storage Tanks.

The submittal of this application is not necessary if a change of business name has occurred at a currently permitted service station or a change of ownership has occurred at a currently permitted service station. If either of these has occurred, please submit correspondence to this office indicating the following: the address of the station, the previous business (or owner's) name, the updated business (or owner's) name and the existing Service Station Permit number. After receiving the request, the DPCS will issue an updated Motor Fuel Dispensing Facility Permit.

The undersigned deposes and says that the information and statements contained in this application are true and correct and are made for the purpose of obtaining an approval from the OSFM for the operation of a motor fuel dispensing facility. The installation shall be made in full accord with the conditions set forth in this submitted application & site drawings.

Name of Applicant: _____ Title: _____ Date: _____

Representing: _____ Signature: _____